

ATTACHMENT 1

Summary of Dental Services and Whether Prior Authorization Is Required

This attachment is a summary of Medicaid-allowable dental services that no longer require prior authorization (PA) as of September 1, 2006, and lists services in which PA will continue to be required. Refer to this *Wisconsin Medicaid and BadgerCare Update* for more information on limitations and requirements for these services.

Services No Longer Requiring Prior Authorization

Effective for dates of service on and after September 1, 2006, the following dental services no longer require PA. Information contained in this *Update* gives the limitations and requirements for each of these services:

- Panoramic films (D0330).
- Cephalometric films, diagnostic casts, and pre-orthodontic treatment visits (D0340, D0470, D8660).
- Oral/facial photographic images (D0350).
- Prophylaxis and prophylaxis with fluoride (D1110, D1120, D1201, D1205).
- Topical applications of fluoride (D1203, D1204).
- Sealants (D1351) for tooth numbers 1, 4-13, 16, 17, 20-29, 32, 51-82, A-T, and AS-TS.
- Bilateral space maintainers (D1515).
- Crowns (D2390, D2791, D2932, D2933).
- Anterior and bicuspid root canals (D3310, D3320) for recipients ages 21 and older.
- Apicoectomy and retrograde fillings (D3410, D3430).
- Full-mouth debridement (D4355) for recipients ages 13 and older.
- Denture relining laboratory services (D5750, D5751, D5760, D5761).
- Cleft palate prosthetics (D5932, D5955).
- Fixed pediatric partial denture (D6985).
- Surgical extractions (D7210-D7240, D7250).
- Surgical procedures for tooth eruption (D7280, D7282, D7283).
- Surgical reduction of osseous tuberosity (D7485).
- Removal of foreign bodies (D7530, D7540).
- Hospital calls (D9420).

Services Requiring Prior Authorization

The following dental services continue to require PA:

- Molar root canal therapy (D3330) for recipients ages 21 and over.
- Periodontal scaling, root planing, and periodontal maintenance (D4341, D4342, D4910).
- Full-mouth debridement (D4355) for recipients ages 12 and under.
- Full and partial dentures (D5110, D5120, D5211-D5226).
- Orthodontic services (D8010-D8692, excluding D8660).
- Complicated oral surgeries, including temporomandibular joint surgery.